Approved for use through 7/31/2008, OMB 0861-082

PATE	NT APPLICATION	FEE DETERMINA	CION RECORD	mation unless it dis	DEPARTMENT OF COMMER Plays a valid OMB control numb	
Gubellute for Form PTO-87,6					Application or Docket Number	
	CLAIMS AS FILED -	PARTI			441323	
FOR	(Column 1)	(Column 2).	SMALLEN	TITY OR	OTHER THAN SMALL ENTITY	
BASIO FEE (37 CFR 1.18(a))	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE FEE	
TOTAL CLAIMS (37 CFR 1.16(0))	/4/ minus 20 =	. 20		OR	:290	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	10 minus 3 =	4	- X	OR	X 4_18 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))					x: \$2= 398	
If the difference in column 1 is less than zero, enter of the salary a					` <u>+</u> ;=	
	NS AS AMENDED – F		TOTAL	OR	TOTAL ///8	
	01.41/45	(Column 2) (Oolumn 3)	SMALL ENTI	TY OR	OTHER THAN	
1 /// 1 0	MAINING	HIGHEST NUMBER PRESENT EVIOUSLY EXTRA	RATE	DDI:	RATE ADDI	
Total	10 Minus 4	AID FOR =		DNAL EE	RATE ADDITIONAL FEE	
Independent	& Minus	10	X 1 = -	On	× s=	
FIRST PRESENTATION	OF MULTIPLE DEPENDENT C	AIM (37 OFR 1.16(d))	1	OR	X \$=	
·.			TOTAL ADD'L FEE	OR OR	TOTAL	
l ci	AlMS	Column 2) (Column 3)			ADD'L FEE	
8177 REF	TER PRE	MABER PRESENT EXTRA	RATE AD		RATE ADDY	
Total (37 CFR (.16(c)) Independent	Minus "	20 0	X I S		TIONAL	
(3) CFR 1.16(b))	Minus	0 0	× \$ =		×	
WHO PRESENTATION OF	MULTIPLE DEPENDENT CLA	IM (37 CF(X 1.16(d))	+1=			
	1)70 17 10 15	** (5)	TOTAL ADD'L FEE	· 7	OTAL DD LFEE	
(Colui CLA REMA	IMS : HIGH	umin 2) (Column 3)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
AFT AMEND	FR SOCIAL	IBER PRESENT OUSLY EXTRA FOR	RATE ADDITIONAL	ic : -	RATE ADDI-	
(27 CFR 1.16(c))	Minus		FEE	= =	TIONAL FEE	
Independent (37 CFR.1.16(b))	Minus ;	=	X	OR X		
FIRST PRESENTATION OF I	MULTIPLE DEPENDENT CLAIM	(37 GFR 1.16(d))	+: =	OR X	<u></u>	
If the only to	· · · · · · · · · · · · · · · · · · ·		TOTAL ADD'L FEE	OR +	TAL TAL	
I IBB "Highest Number D	ess than the entry in column eviously Paid For IN THIS E plously Paid For IN THIS S lously Paid For Chalal or in	アヘレに 15 1855 INBN 20 Ania	or *20*	· OR AD	D'L FEE	
he 'Highest Number Prev	Mously Pald For IN THIS:8 lously Pald For (Total or Income on the Income of	PACE is less than 3, enter	*g*			

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 infaultes to complete, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggissitons for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEMD FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.